2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #L31167

1. Entity Name
LA VERANDA, NC.



FILED Feb 06, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

C/O FRANCO AN IMUCCI 2121 EAST ATLANTIC BLVD. POMPANO BEACH, FL 33062 DO NOT WRITE IN THIS SPACE				01112008 4. FEI Numb 65-016	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required	
	6. Name and Address of Current Regis	tered Agent	T			1 do recquiros	
ANTIMUCCI, FRANCO 2121 EAST ATLANTIC BLVD. POMPANO BEACH, FL 33062				DO NOT WRITE IN THIS SPACE			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept							
the obligations of registered agent.							
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00. After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees	:		
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANTIMUCCI, FRANCO 2121 E. ATLANTIC BLVD. POMPANO BEACH, FL					0816425 -80050-001 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIANPIERO, DAVERIO 2121 E ATLANTIC BLVD POMPANO BEACH, FL 33062				UZ/14/US-	99050-001 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP	· .						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
	entify that the information supplied with this fi	ling does not qualify for the over	motions sector	inad in Chaster 110	Borida Statutos 14	huther endth, that the laferranti-	

indicated on this report or supplied with rins filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the leceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

2/6/04 9549477390